

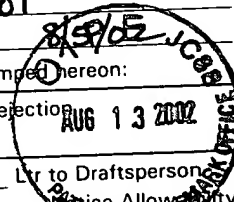
CLIENT/MATTER NO. 3790-60721 ATTY/SEC MP6:eyv

INVENTOR(S): Harold O. Schwartz et al.

APP. NO. 09/930,123 FILING DATE 8/14/01

The following, due _____, mailed _____
by First Class Mail, was received in the U.S. PTO on the date stamped hereon:

<input type="checkbox"/> Amendment <input type="checkbox"/> Marked Up Claims/Spec. <input type="checkbox"/> After Final Rejection	
<input type="checkbox"/> Extension of Time/Extension Fee for _____ Months	
<input type="checkbox"/> Notice to File Missing Parts - Date _____	<input type="checkbox"/> Ltr to Draftsperson _____
<input type="checkbox"/> Notice to File Corrected App. Papers - Date _____	<input type="checkbox"/> Notice-Allowability _____
<input type="checkbox"/> Comb. Dec./POA <input type="checkbox"/> Sht(s) Drawings _____	<input type="checkbox"/> Sht(s) Drawings _____
<input type="checkbox"/> Issue Fee Transmittal (Form PTOL-85b)	<input type="checkbox"/> Sequence Listing _____ pages
<input type="checkbox"/> Supp. Dec. <input type="checkbox"/> Issue/Adv. Order fees	<input type="checkbox"/> Stmt in Comp. _____ Disk
<input type="checkbox"/> IDS <input type="checkbox"/> Form PTO-1449/Ref.	<input type="checkbox"/> Petition
<input type="checkbox"/> Assignment to: _____ Recordal Sheet	
<input checked="" type="checkbox"/> Transmittal Ltr. + <input checked="" type="checkbox"/> 2 copy(ies)	<input type="checkbox"/> Request for Corrected Filing Receipt
<input type="checkbox"/> Check No. _____ for \$ _____	<input checked="" type="checkbox"/> Deposit Acct. 02-4550 Authority
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